

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number 09/869069	
Substitute for Form PTO-875							
CLAIMS AS FILED - PART I				SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		RATE		FEE	
FOR		NUMBER FILED		NUMBER EXTRA			
BASIC FEE (37 CFR 1.16(a))							
TOTAL CLAIMS (37 CFR 1.16(c))		minus 20 =		*			
INDEPENDENT CLAIMS (37 CFR 1.16(b))		minus 3 =		*			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL	
CLAIMS AS AMENDED - PART II							
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total (37 CFR 1.16(c))		Minus		**		=	
Independent (37 CFR 1.16(b))		Minus		***		=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total (37 CFR 1.16(c))		Minus		**		=	
Independent (37 CFR 1.16(b))		Minus		***		=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total (37 CFR 1.16(c))		Minus		**		=	
Independent (37 CFR 1.16(b))		Minus		***		=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.